## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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DOCUMENT # H29571  1. Corporation Name  G. & R. Roofing Company, Incorporated								SECRETARY OF STATE TALLAHASSEE, FLORIDA				
13234 88th Avenue North												
2. Principal Office Address 13234 88th Avenue North					Mailing Office Addres	Office Address			STA	ATEMEN'	03-	04_
Suite, Apt. #, etc.				Suite	Suite, Apt. #, etc.			Date Incorporated or Qualified     To Do Business in Florida 11/13/84				
City & State Seminole, FL			City	City & State			5. FEI Number					
Zip 33776	Country USA		y	Zip		Country					Not Ap	required
			•		7. Name and A	ddress of Curre	nt Registere	ed Agent				
	Name Denis A. Cohrs											
	Street Address (P.O. Box Number is Not Acceptable) 2575 Ulmerton Road											
	Suite, Apt. #, <sup>®</sup> Etc. Suite 210											
	City Clearwater								State FL	Zip Code 33762		
8. 1, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.												
Signature of Registered Agent											CR2E081 (01/04	
1				REGISTE	RED AGENT MUST	SIGN						
9. Names	and Street A	ddresses		and/or Dire	ector (Florida nonpro			st 3 directors)				
Titles	les Name of Officers and/or D			tors		Street Address of Each Officer and/or Director			City / State / Zip			
P/S/D	Timothy Revels				13234 88th Ave North				Seminole, FL 33776			
								1711	<del>)                                     </del>		<del></del>	
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										Dr.	16/14	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been adid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accordate, and my signature shall have the same legal effect as if made under oath.												
SIGNATURE:										_ ]		
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR									Daytime I	Phone #	_

VOICE (727) 540-0001 • FAX (727) 540-0027 E-MAIL dcohrs@cohrslaw.com

June 25, 2004

## SENT VIA FEDERAL EXPRESS

Florida Secretary of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RE: G. & R. Roofing Company, Inc.

Dear Sirs/Madam:

This firm represents G. & R. Roofing Company, Inc. On behalf of our client, we hereby advise you that our client did not receive the 2003 Annual Report for filing. As such, enclosed is an application for reinstatement together with a check in the amount of \$300.00 representing the required reinstatement fee. Please cause the reinstatement application to be filed and forward to us a certified copy thereof.

Should you require anything further with respect to this matter, please give me a call.

Sincerely

Denis A. Cohrs-

DAC/mi Enclosure

cc: G. & R. Roofing Company, Inc.